**ECH CENTER 1600/2900** 

8-02 PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

opplicant: P. A. Billing-Medel, et al.

MAN 0 7 2002 Serial No.: 09/080,140

iled: May 15, 1998

For: REAGENTS AND METHODS USEFUL FOR DETECTING DISEASES OF THE PROSTATE

Examiner: K. Canella

Group Art Unit: 1642

Case No.: 6105.US.P1

Date: May 6, 2002

EXPRESS MAIL NO.: EL507386450US

Certificate of Mailing und r 37 CFR §1.40:

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service as Express Mail Post Office to Addressee Service with sufficient postage in an envelope addressed to:

Assistant Commissioner for Patents Box CPA

Washington, D.C. 20231, on:

Date of Deposit: May /, 2002

Vanda C. Smith 5/7/0c

## TRANSMITTAL LETTER

Assistant Commissioner for Patents Box CPA Washington, D.C. 20231

Dear Sir:

Enclosed herewith is Continued Prosecution Application (CPA) Transmittal Letter for P. A. Billing-Medel, *et al.*, for REAGENTS AND METHODS USEFUL FOR DETECTING DISEASES OF THE PROSTATE, the specification of which was filed on May 15, 1998, and received Serial No. 09/080,140.

Also enclosed are:

Request for Extension of Time

Return-receipt postcard.

The Commissioner is hereby authorized to charge any additional Filing Fees required under 37 CFR 1.16, as well as any patent application processing fees under 37 CFR 1.17 associated with this communication for which full payment has not been tendered, to Deposit Account No. 01-0025. A duplicate copy of this sheet is enclosed.

23492

ABBOTT LABORATORIES Telephone: (847) 935-7550

Facsimile: (847) 938-2623

Respectfully submitted,

P. A. Billing-Medel, et al

Mimi C. Goller

Registration No. 39,046 Attorney for Applicants PTO/SB/29 (8/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<u> </u>	1		T	1		
CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS	
	TOTAL CLAIMS (37 C.F.R. § 1.16(c) or (j))	22 -20* =	. 2	x \$ <u>18.00</u> =	\$ 36.00	
	INDEPENDENT CLAIMS (37 C.F.R.§1.16(b) or (i))	13 -3** =	10	x \$ <u>84.00</u> =	840.00	
ī	MULTIPLE DEPENDENT					
			·	BASIC FEE (37 C.F.R. §1.16)	740.00	
	Reduction by 50% for filing by small entity (Note 37 C.F.R. §§ 1.9, 1.27 & 1.28).					
* (5 5						
	* Reissue claims in excess ** Reissue independent clai			TOTAL =	1,616.00	
6. Small entity status:						
<ul> <li>a.  A small entity statement is enclosed, if (b) and (c) do not apply.</li> <li>b.  A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.</li> <li>c.  Is no longer claimed.</li> <li>7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No.</li></ul>						
9. New Attorney Docket Number, if desired						
[Prior application Attorney Docket Number will carryover to this CPA <u>unless</u> a new Attorney Docket Number has been provided herein.]  10 a. Receipt For Facsimile Transmitted CPA (PTO/SB/29A)						
b. X Return Receipt Postcard (Should be specifically itemized, See MPEP 503)  11. X Other: Request for Extension of Time						
NOTE:  The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below.						
12. NEW CORRESPONDENCE ADDRESS						
Customer Number or Bar Code Label     (Insert Customer No. or Attach bar code label here)					rrespondence address below	
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Journal		receptions		, , ,		

13. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
Name (Print /Type)	Mimi L. Goller,			
Signature	Millalla			
Registration No. (Attorney/Agent)	39,046			
Date	May 10, 2002			